

Recipient Committee  
Campaign Statement  
Cover Page

(Government Code Sections 84200-84216.5)

Type or print in ink.

FILE  
Date Stamp  
JAN 31 2006

COVER PAGE

CALIFORNIA 460  
2001/02  
FORM

Page 1 of 11

SEE INSTRUCTIONS ON REVERSE

Statement covers period  
from 07/01/2005  
through 12/31/2005

Date of election if applicable:  
(Month, Day, Year)

REGISTRAR OF VOTERS

By [Signature] Deputy

For Official Use Only

COPY

1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.

- ☒ Officeholder, Candidate Controlled Committee  
☐ State Candidate Election Committee  
☐ Recall  
(Also Complete Part 5)
- ☐ General Purpose Committee  
☐ Sponsored  
☐ Small Contributor Committee  
☐ Political Party/Central Committee
- ☐ Primarily Formed Ballot Measure Committee  
☐ Controlled  
☐ Sponsored  
(Also Complete Part 6)
- ☐ Primarily Formed Candidate/Officeholder Committee  
(Also Complete Part 7)

2. Type of Statement:

- ☐ Preelection Statement  
☒ Semi-annual Statement  
☐ Termination Statement  
(Also file a Form 410 Termination)  
☐ Amendment (Explain below)
- ☐ Quarterly Statement  
☐ Special Odd-Year Report  
☐ Supplemental Preelection Statement - Attach Form 495

3. Committee Information

I.D. NUMBER  
1276969

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

Chriss Street for Orange County Treasurer

STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER

Betty Presley  
MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 1-24-06  
Date

Executed on 1-26-06  
Date

Executed on \_\_\_\_\_  
Date

Executed on \_\_\_\_\_  
Date

By [Signature] Betty Presley  
Signature of Treasurer or Assistant Treasurer

By [Signature] [Signature]  
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

Recipient Committee  
Campaign Statement  
Cover Page — Part 2

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA  
FORM **460**

Page 2 of 11

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Chriss Street

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

Local Treasurer  
County of Orange

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

**Related Committees Not Included in this Statement:** *List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.*

COMMITTEE NAME

I.D. NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

☐ YES ☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

COMMITTEE NAME

I.D. NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

☐ YES ☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER

JURISDICTION

☐ SUPPORT  
☐ OPPOSE

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD

DISTRICT NO. IF ANY

7. Primarily Formed Candidate/Officeholder Committee *List names of officeholder(s) or candidate(s) for which this committee is primarily formed.*

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT  
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT  
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT  
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT  
☐ OPPOSE

Attach continuation sheets if necessary

# Campaign Disclosure Statement Summary Page

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SUMMARY PAGE

|  |  |  |
|--|--|--|
| Statement covers period<br>from 07/01/2005<br>through 12/31/2005 |  | <b>CALIFORNIA FORM 460</b><br>Page 3 of 11<br>I.D. NUMBER<br>1276969 |
|  |  |  |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Chriss Street for Orange County Treasurer

## Contributions Received

|                                       |                    | Column A<br>TOTAL THIS PERIOD<br>(FROM ATTACHED SCHEDULES) | Column B<br>CALENDAR YEAR<br>TOTAL TO DATE |
|---------------------------------------|--------------------|--|--|
| 1. Monetary Contributions .....       | Schedule A, Line 3 | \$ 3,040.00  | \$ 7,139.00                                |
| 2. Loans Received .....               | Schedule B, Line 3 | 65,000.00  | 165,000.00                                 |
| 3. SUBTOTAL CASH CONTRIBUTIONS .....  | Add Lines 1 + 2    | \$ 68,040.00   | \$ 172,139.00                              |
| 4. Nonmonetary Contributions .....    | Schedule C, Line 3 | 0.00   | 0.00                                       |
| 5. TOTAL CONTRIBUTIONS RECEIVED ..... | Add Lines 3 + 4    | \$ 68,040.00   | \$ 172,139.00                              |

## Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

|                            |                  |             |
|----------------------------|------------------|-------------|
|                            | 1/1 through 6/30 | 7/1 to Date |
| 20. Contributions Received | \$               | \$          |
| 21. Expenditures Made      | \$               | \$          |

## Expenditures Made

|  |                      | Column A<br>TOTAL THIS PERIOD<br>(FROM ATTACHED SCHEDULES) | Column B<br>CALENDAR YEAR<br>TOTAL TO DATE |
|--|----------------------|--|--|
| 6. Payments Made .....                   | Schedule E, Line 4   | \$ 15,509.06   | \$ 27,259.08                               |
| 7. Loans Made .....                      | Schedule H, Line 3   | 0.00   | 0.00                                       |
| 8. SUBTOTAL CASH PAYMENTS .....          | Add Lines 6 + 7      | \$ 15,509.06   | \$ 27,259.08                               |
| 9. Accrued Expenses (Unpaid Bills) ..... | Schedule F, Line 3   | 0.00   | 0.00                                       |
| 10. Nonmonetary Adjustment .....         | Schedule C, Line 3   | 0.00   | 0.00                                       |
| 11. TOTAL EXPENDITURES MADE .....        | Add Lines 8 + 9 + 10 | \$ 15,509.06   | \$ 27,259.08                               |

## Expenditure Limit Summary for State Candidates

|  |               |
|--|---------------|
| 22. Cumulative Expenditures Made*<br>(If Subject to Voluntary Expenditure Limit) |               |
| Date of Election<br>(mm/dd/yy)   | Total to Date |
| / /  | \$            |
| / /  | \$            |

## Current Cash Statement

|   |   |               |
|---|---|---------------|
| 12. Beginning Cash Balance .....          | Previous Summary Page, Line 16                | \$ 92,348.98  |
| 13. Cash Receipts .....                   | Column A, Line 3 above                        | 68,040.00     |
| 14. Miscellaneous Increases to Cash ..... | Schedule I, Line 4                            | 0.00          |
| 15. Cash Payments .....                   | Column A, Line 8 above                        | 15,509.06     |
| 16. ENDING CASH BALANCE .....             | Add Lines 12 + 13 + 14, then subtract Line 15 | \$ 144,879.92 |

If this is a termination statement, Line 16 must be zero.

|                                    |                    |         |
|------------------------------------|--------------------|---------|
| 17. LOAN GUARANTEES RECEIVED ..... | Schedule B, Part 2 | \$ 0.00 |
|------------------------------------|--------------------|---------|

## Cash Equivalents and Outstanding Debts

|                             |                                       |               |
|-----------------------------|---------------------------------------|---------------|
| 18. Cash Equivalents .....  | See instructions on reverse           | \$ 0.00       |
| 19. Outstanding Debts ..... | Add Line 2 + Line 9 in Column B above | \$ 165,000.00 |

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

\*Amounts in this section may be different from amounts reported in Column B.

# Schedule A Monetary Contributions Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE A

|  |  |                            |
|--|--|----------------------------|
| Statement covers period<br>from 07/01/2005<br>through 12/31/2005 |  | <b>CALIFORNIA FORM 460</b> |
| Page 4 of 11   |  |                            |
| I.D. NUMBER<br>1276969   |  |                            |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Chriss Street for Orange County Treasurer

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE<br>CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|---|---------------------------------------|
| 08/23/2005         | Christopher Townsend<br>[REDACTED]<br>[REDACTED]  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | President<br><br>Townsend Public Affairs, Inc.  | 1,500.00                    | 1,500.00  |                                       |
| 08/30/2005         | Jim Battle<br>[REDACTED]<br>[REDACTED]  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Commercial Realtor<br><br>ReMax   | 40.00                       | 40.00   |                                       |
| 12/30/2005         | Tom W. Thomson<br>[REDACTED]<br>[REDACTED]  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Real Estate<br><br>Coldwell Banker  | 1,500.00                    | 1,500.00  |                                       |
|                    |   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   |                             |   |                                       |
|                    |   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   |                             |   |                                       |
| <b>SUBTOTAL \$</b> |   |   |   | 3,040.00                    |   |                                       |

## Schedule A Summary

- Amount received this period – itemized monetary contributions.  
(Include all Schedule A subtotals.) ..... \$ 3,040.00
- Amount received this period – unitemized monetary contributions of less than \$100 ..... \$ 0.00
- Total monetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL \$** 3,040.00

\*Contributor Codes  
IND – Individual  
COM – Recipient Committee  
(other than PTY or SCC)  
OTH – Other (e.g., business entity)  
PTY – Political Party  
SCC – Small Contributor Committee

# Schedule B – Part 1 Loans Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE B - PART 1

|                         |            |                            |
|-------------------------|------------|----------------------------|
| Statement covers period |            | <b>CALIFORNIA FORM 460</b> |
| from                    | 07/01/2005 |                            |
| through                 | 12/31/2005 | Page 5 of 11               |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Chriss Street for Orange County Treasurer

I.D. NUMBER

1276969

| FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | (a)<br>OUTSTANDING BALANCE BEGINNING THIS PERIOD | (b)<br>AMOUNT RECEIVED THIS PERIOD | (c)<br>AMOUNT PAID OR FORGIVEN THIS PERIOD *   | (d)<br>OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD | (e)<br>INTEREST PAID THIS PERIOD | (f)<br>ORIGINAL AMOUNT OF LOAN | (g)<br>CUMULATIVE CONTRIBUTIONS TO DATE          |
|---|---|--|------------------------------------|--|--|----------------------------------|--------------------------------|--|
| Chriss Street<br>[REDACTED]<br>[REDACTED]   | President<br><br>Street Asset Management  |  |                                    | <input type="checkbox"/> PAID<br>\$ 0.00<br><input type="checkbox"/> FORGIVEN<br>\$ 0.00                 | \$ 25,000.00                                       | 0.00%<br>RATE                    | \$ 25,000.00                   | CALENDAR YEAR<br>\$ 200,000.00<br>PER ELECTION** |
| <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC |   | \$ 25,000.00                                     | \$ 0.00                            | \$ 0.00  | DATE DUE   | \$ 0.00                          | 05/12/2005<br>DATE INCURRED    | \$   |
| Chriss Street<br>[REDACTED]<br>[REDACTED]   | President<br><br>Street Asset Management  |  |                                    | <input checked="" type="checkbox"/> PAID<br>\$ 35,000.00<br><input type="checkbox"/> FORGIVEN<br>\$ 0.00 | \$ 40,000.00                                       | 0.00%<br>RATE                    | \$ 75,000.00                   | CALENDAR YEAR<br>\$ 200,000.00<br>PER ELECTION** |
| <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC |   | \$ 75,000.00                                     | \$ 0.00                            | \$ 0.00  | DATE DUE   | \$ 0.00                          | 06/29/2005<br>DATE INCURRED    | \$   |
| Chriss Street<br>[REDACTED]<br>[REDACTED]   | President<br><br>Street Asset Management  |  |                                    | <input type="checkbox"/> PAID<br>\$ 0.00<br><input type="checkbox"/> FORGIVEN<br>\$ 0.00                 | \$ 100,000.00                                      | 0.00%<br>RATE                    | \$ 100,000.00                  | CALENDAR YEAR<br>\$ 200,000.00<br>PER ELECTION** |
| <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC |   | \$ 0.00  | \$ 100,000.00                      | \$ 0.00  | 12/31/2006<br>DATE DUE                             | \$ 0.00                          | 12/31/2005<br>DATE INCURRED    | \$   |
| <b>SUBTOTALS</b>  |   | \$ 100,000.00                                    | \$ 35,000.00                       | \$ 165,000.00  | \$ 0.00  |                                  |                                |  |

## Schedule B Summary

- Loans received this period ..... \$ 100,000.00  
(Total Column (b) plus unitemized loans of less than \$100.)
- Loans paid or forgiven this period ..... \$ 35,000.00  
(Total Column (c) plus loans under \$100 paid or forgiven.)  
(Include loans paid by a third party that are also itemized on Schedule A.)
- Net change this period. (Subtract Line 2 from Line 1.) ..... **NET \$ 65,000.00**  
Enter the net here and on the Summary Page, Column A, Line 2.  
(May be a negative number)

†Contributor Codes  
IND – Individual  
COM – Recipient Committee  
(other than PTY or SCC)  
OTH – Other (e.g., business entity)  
PTY – Political Party  
SCC – Small Contributor Committee

\*Amounts forgiven or paid by another party also must be reported on Schedule A.

\*\* If required.

**Schedule D**  
**Summary of Expenditures**  
**Supporting/Opposing Other**  
**Candidates, Measures and Committees**

Type or print in ink.  
 Amounts may be rounded  
 to whole dollars.

|                         |            |                            |  |
|-------------------------|------------|----------------------------|--|
| Statement covers period |            | SCHEDULE D                 |  |
| from                    | 07/01/2005 | CALIFORNIA FORM <b>460</b> |  |
| through                 | 12/31/2005 | Page 6 of 11               |  |
|                         |            | I.D. NUMBER<br>1276969     |  |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Chriss Street for Orange County Treasurer

| DATE               | NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE | TYPE OF PAYMENT  | DESCRIPTION (IF REQUIRED) | AMOUNT THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|--------------------|---|--|---------------------------|--------------------|---|------------------------------------|
| 07/11/2005         | Republican Party of Orange County   | <input checked="" type="checkbox"/> Monetary Contribution<br><input type="checkbox"/> Nonmonetary Contribution<br><input type="checkbox"/> Independent Expenditure |                           | 5,095.00           | 5,095.00  |                                    |
|                    | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose                         |  |                           |                    |   |                                    |
|                    |   | <input type="checkbox"/> Monetary Contribution<br><input type="checkbox"/> Nonmonetary Contribution<br><input type="checkbox"/> Independent Expenditure            |                           |                    |   |                                    |
|                    | <input type="checkbox"/> Support <input type="checkbox"/> Oppose                                    |  |                           |                    |   |                                    |
|                    |   | <input type="checkbox"/> Monetary Contribution<br><input type="checkbox"/> Nonmonetary Contribution<br><input type="checkbox"/> Independent Expenditure            |                           |                    |   |                                    |
|                    | <input type="checkbox"/> Support <input type="checkbox"/> Oppose                                    |  |                           |                    |   |                                    |
| <b>SUBTOTAL \$</b> |   |  |                           | 5,095.00           |   |                                    |

**Schedule D Summary**

- Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) ..... \$ 5,095.00
- Unitemized contributions and independent expenditures made this period of under \$100 ..... \$ 0.00
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) ..... **TOTAL \$** 5,095.00